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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)		
None	-----	-----		
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on the supplemental priority data sheet PTO/SB/02B attached hereto.				
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: <input type="checkbox"/> Customer Number 23582 → <input type="checkbox"/> Registered practitioner(s) name/registration number listed below				
Name	Registration Number	Name		
Papan Devnani, Esq C. C. Shroff	27,484 29,347	Alvin Heindel PATENT TRADEMARK OFFICE 23582		
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental registration information sheet PTO/SB/02C attached hereto.				
Direct all correspondence to: <input type="checkbox"/> Customer Number 23582 OR <input type="checkbox"/> Correspondence address below				
Name	Chandrakant C. Shroff PATENT TRADEMARK OFFICE			
Address	Parent Patent Research, Inc.			
Address	600 North Pickett Street			
City	Alexandria	State Va. ZIP 22304-2110		
Country	U.S.A.	Telephone (703) 823-2024 Fax (703) 823-0032		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any) Rex		Family Name or Surname Hoover		
Inventor's Signature	<i>Rex C. Hoover</i>		Date 3-2-01	
Residence: City	Sumerduck	State Va.	Country U.S.A.	Citizenship U.S.
Post Office Address	5263 Stewart Road			
Post Office Address				
City	Sumerduck	State Va.	ZIP 22742	Country U.S.A.
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto				

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PTO/SB/02A (3-97)
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page ____ of ____

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Robert G.

Hoover

Inventor's Signature

Date

Residence: City

Sumerduck

State

Va.

Country

U.S.A.

U.S.

Citizenship

Post Office Address

5263 Stewart Road

Post Office Address

City

Sumerduck

State

Va.

ZIP

22742

Country

U.S.

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Country

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DECLARATION — Supplemental Priority Data Sheet

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**REGISTERED PRACTITIONER
INFORMATION
(Supplemental Sheet)**

Name	Registration Number	Name	Registration Number
Papan Devnani, Esq.	27,484		
C. C. Shroff	29,347		
Alvin Heindel	41,061		

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**STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(b))—INDEPENDENT INVENTOR**Docket Number (Optional)
02102-15Applicant, Patentee, or Identifier: Rex A. Hoover and Robert G. HooverApplication or Patent No.: Submitted herewith

Filed or Issued:

Title: FORENSIC MICROSCOPY SYSTEM.

As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

- the specification filed herewith with title as listed above.
 the application identified above.
 the patent identified above.

I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- No such person, concern, or organization exists.
 Each such person, concern, or organization is listed below.

Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

Rex A. Hoover
NAME OF INVENTOR

Rex A. Hoover
Signature of inventor

3-02-01
Date

Robert G. Hoover
NAME OF INVENTOR

Robert G. Hoover
Signature of inventor

3/02/01
Date

NAME OF INVENTOR

Signature of inventor

Date

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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	02102-15
First Named Inventor	Hoover, Rex
COMPLETE IF KNOWN	
Application Number	
Filing Date	submitted herewith
Group Art Unit	
Examiner Name	

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FORENSIC MICROSCOPY SYSTEM

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
none	-----	-----	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
none	-----	<input type="checkbox"/>

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